

## CLAIMS ONLY

Application Number

101613304

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
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38						
39						
40						
41						
42						
43						
44						
45						
46						
47	1					
48		1				
49		1				
50		1				
Total Indep						
Total Depend						
Total Claims						

51						
52						
53		1				
54						
55			1			
56			1			
57			1			
58				1		
59				1		
60				1		
61				1		
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69		1				
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89		1				
90			1			
91			1			
92			1			
93			1			
94			1			
95			1			
96			1			
97		1				
98		1				
99						
100						
Total Indep			16			
Total Depend			35			
Total Claims			45			